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POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/794,462
	Filing Date	February 23, 2004
	First Named Inventor	Humberto A. Berra
	Title	Stent Graft With Longitudinal
	Art Unit	3738
	Examiner Name	Petragrino, Brian E.
	Attorney Docket Number	Bolton1042

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

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I am the:

☐ Applicant/Inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SSB/6) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

Signature

Mary K. Murray

Date

07 AUG 2009

Name

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Title and Company

Dir of R&D

BOLTON MEDICAL, INC.

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1 forms are submitted.

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